

Intimate Partner Violence – Family Assessment Intervention Response (IPV-FAIR)

Questions and Answers

Bidder's Conference July 31, 2015

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1. You said that all of the training will be delivered by the State; you said even like staff turnover a year from now, even two years from now they will be trained?

A. Yes, it is our intention to continue to train to manage turnover. Our plan is provide training periodically, so that there is training for the new clinicians and navigators.

2. So, there's no expectations on out of state travel?

A. No

3. Third Party going for fathers for change brand new, what if it turns out that for instance the insurance company or Medicaid decides that they don't feel this is medical needed?

A. It is expected that providers will maximize 3rd party reimbursement. If insurance will not cover the service, the provider should still deliver the service.

4. Do you expect or prefer fathers for change happens at office locations in each place where there is a DCF office or do you expect or prefer only or model centralization so all DCF or more than one office.

A. The model developer for Fathers for Change, Carla Stover, Ph.D. indicated that Fathers for Change is a clinical intervention so should be delivered in a setting that will allow for some privacy and confidentiality. This can be in a clinical office setting or if needed due to family transportation constraints or other barriers, in the home.